

**FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/				
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50		/				
TOTAL IND.	4					
TOTAL DEP.	27					
TOTAL CLAIMS	31					

	* IND. DEP.		* IND. DEP.		* IND. DEP.	
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